



ULHASNAGAR MUNICIPAL CORPORATION

CITIZEN FACILITATION CENTRE

SUBJECT:-	COMPLAINTS REGARDING STREET LIGHTS												
Token Number (For Office Use)													
											Date:-	/	/
Citizen Identification Number													
(If Citizen Identification Number is given, do not fill below Details)													
Applicant's Details:													
Last Name/ Surname				Name				Father/Husband's Name					
Details of Society (If Application from Society):													
Name Of Society:													
Designation													
Address:													
Head				Information									
House/Building/Soc. Name:													
Flat/Block/Barrack No.:				Wing/Floor:									
Road/Street/Lane:													
Area/Locality/Town/City:				Taluka:									
Pin code:													
Wards Committee No.:				1 [] 2 [] 3 [] 4 []									
Electrol Panel No.:													
Telephone No. (if any):				Contact Person:									
Email Address (if any):													

Classification: - (Tick [✓] whichever applicable)

[] Street lights are on during day time [] Street lights are not working [] Street lights are not installed

[] Arrangement of signal system on road. [] Signal system on road is not in working condition [] Others

Details of Complaint:-

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[Note:- Please attach necessary documents regarding Complaint.]

Applicant's Signature